

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005932

FILED
Feb 13, 2008
Secretary of State

Entity Name: THE LORD'S HOUSE OF PRAYER FOR ALL PEOPLE, INC.

Current Principal Place of Business:

5251 NE 8TH AVENUE
POMPANO BEACH, FL 33064

New Principal Place of Business:

Current Mailing Address:

5251 NE 8TH AVENUE
POMPANO BEACH, FL 33064

New Mailing Address:

FEI Number: 65-1500007

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, LUCIUS W
5251 NE 8TH AVENUE
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROBINSON, LUCIUS W
Address: 5201 NE 8TH AVE
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: TD () Delete
Name: MILLER, MAXINE V
Address: 570A AUBURN CIRCLE EAST
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: TD (X) Delete
Name: WALKER, PATRICIA P
Address: 411 NE 13TH AVENUE
City-St-Zip: BOYNTON BEACH, FL 33435 US

Title: TD () Delete
Name: JACKSON, CHERYL C
Address: 411 NE 13TH AVENUE
City-St-Zip: BOYNTON BEACH, FL 33444 US

Title: TD () Delete
Name: ROBINSON, HARLINE
Address: 5251 NE 8TH AVENUE
City-St-Zip: POMPANO BEACH, FL 33441 US

Title: TD () Delete
Name: SINGLETON, DONALD L
Address: 216 SW 1ST AVE
City-St-Zip: BOYNTON BEACH, FL 33444

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUCIUS WESTLEY ROBINSON

PD

02/13/2008

Electronic Signature of Signing Officer or Director

Date